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DEC 30 1999

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Lawrence Darr

(Depositor's name)

Lawrence Darr

(Signature)

DEC 21 1999

(Date)

APPLICATION NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
08/913,257	12/05/97	016	DEEMIE, R	1621 09/21/99
First Named Applicant	GIERSKOCKY,		KARL E.	

TITLE OF INVENTION ESTERS OF 5-AMINOLEVULINIC ACID AS PHOTOCHEMOTHERAPY AGENTS IN

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEES DUE	DATE DUE
1 697,002/031	561-155,000	R/9	UTILITY	NO	\$1210.00	12/21/99

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
Use of PTO form(s) and Customer Number are recommended, but not required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47) attached.

Schwegman, Lundberg,

Woessner & Kluth, P.A.

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the PTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

PhotoCure AS

(B) RESIDENCE: (CITY & STATE OR COUNTRY)

Olso, NO

Please check the appropriate assignee category indicated below (will not be printed on the patent)

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4a. The following fees are enclosed (make check payable to Commissioner of Patents and Trademarks):

Issue Fee
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The COMMISSIONER OF PATENTS AND TRADEMARKS IS requested to apply the Issue Fee to the application identified above.

(Authorized Signature)

(Date)
12/21/99

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01 FC:242
02 FC:561

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